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BEDMINISTER, NJ 07921 APR 01 2010 Grace Adame Depositor's name) OFFICE OF PETITIONS race Locerro (Stgaoture APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 08/926,187 09/08/1997 David A. Connolly A00215 Con 2 TITLE OF INVENTION wheless digital Petsonal Communications system having voice/data/image two-way calling and intercent hand-off Provided through distributed logic resident in Partable Handset terminals, thed terminals, Radio cell Base stations and switched telephone nethoric PUBLICATION PER TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1510 \$300 \$1810 10/15/99 EXAMINER ART UNIT CLASS-SUBCLASS TROST, William G. 2744 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 Toler Law Group Change of correspondence address (or Change of Correspondence Address form PTO/SE/122) attached. (1) the names of up to 3 registered patent anorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3_ 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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42,	asc check the appropriate assignee category or categories (will not be The following fee(a) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies _1	e printed on the patent): Individual Corporation or other private group entity Government 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is kereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2469
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Apr. 1,2010

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